

FORM
2
Rev
12/05

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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APPLICATION FOR PERMIT TO:

1. Drill, Deepen, Re-enter, Recomplete and Operate

2. TYPE OF WELL

OIL GAS COALBED OTHER _____
SINGLE ZONE MULTIPLE ZONE COMMINGLE ZONE

Refiling
Sidetrack

Document Number:
1759251
Plugging Bond Surety
20090081

3. Name of Operator: ENERPLUS RESOURCES (USA) CORPORATION 4. COGCC Operator Number: 10177

5. Address: 1700 LINCOLN ST STE 1300
City: DENVER State: CO Zip: 80203

6. Contact Name: MEGHAN ECALENZO Phone: (720)279-5500 Fax: (720)279-5550
Email: MCALENZO@ENERPLUS.COM

7. Well Name: KOESTER Well Number: 6-52-27-44

8. Unit Name (if appl): _____ Unit Number: _____

9. Proposed Total Measured Depth: 4800

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 27 Twp: 6N Rng: 52W Meridian: 6
Latitude: 40.452680 Longitude: -103.162040

Footage at Surface: 660 FNL/FSL FSL 660 FEL/FWL FEL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 4376 13. County: LOGAN

14. GPS Data:

Date of Measurement: 09/10/2009 PDOP Reading: 2.4 Instrument Operator's Name: DARREN VEAL

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL _____ FEL/FWL _____ Bottom Hole: FNL/FSL _____ FEL/FWL _____

Sec: _____ Twp: _____ Rng: _____ Sec: _____ Twp: _____ Rng: _____

16. Is location in a high density area? (Rule 603b)? Yes No

17. Distance to the nearest building, public road, above ground utility or railroad: 3445 ft

18. Distance to nearest property line: 2014 ft 19. Distance to nearest well permitted/completed in the same formation: 2 mi

20. LEASE, SPACING AND POOLING INFORMATION

Objective Formation(s)	Formation Code	Spacing Order Number(s)	Unit Acreage Assigned to Well	Unit Configuration (N/2, SE/4, etc.)
J SAND	JSND			

21. Mineral Ownership: Fee State Federal Indian Lease #: FEE

22. Surface Ownership: Fee State Federal Indian

23. Is the Surface Owner also the Mineral Owner? Yes No Surface Surety ID#:

23a. If 23 is Yes: Is the Surface Owner(s) signature on the lease? Yes No

23b. If 23 is No Surface Owners Agreement Attached or \$25,000 Blanket Surface Bon \$2,000 Surface Bond \$5,000 Surface Bond

24. Using standard QtrQtr, Sec, Twp, Rng format enter entire mineral lease description upon which this proposed wellsite is located (attach separate sheet/map if you prefer):
SEE ATTACHED PAGE 2

25. Distance to Nearest Mineral Lease Line: 2014 ft 26. Total Acres in Lease: 4536

DRILLING PLANS AND PROCEDURES

27. Is H2S anticipated? Yes No If Yes, attach contingency plan.

28. Will salt sections be encountered during drilling? Yes No

29. Will salt (>15,000 ppm TDS CL) or oil based muds be used during drilling? Yes No

30. If questions 27 or 28 are yes, is this location in a sensitive area (Rule 903)? Yes No **If 28, 29, or 30 are "Yes" a pit permit may be required.**

31. Mud disposal: Offsite Onsite

Method: Land Farming Land Spreading Disposal Facility Other: CUTTINGS BURIED IN RES.

Note: The use of an earthen pit for Recompletion fluids requires a pit permit (Rule 905b). If air/gas drilling, notify local fire officials.

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
SURF	9+7/8	7	H-40 17#	525	150	525	0
1ST	6+1/4	4+1/2	J-55 10.5	4,800	75	4,800	4,000

32. BOP Equipment Type: Annular Preventer Double Ram Rotating Head None

33. Comments NO CONDUCTOR CASING WILL BE SET.

34. Location ID: _____

35. Is this application in a Comprehensive Drilling Plan ? Yes No

36. Is this application part of submitted Oil and Gas Location Assessment ? Yes No

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: MEGHAN E. CALENZO

Title: ENGINEERING TECH. Date: 9/18/2009 Email: MCALENZO@ENERPLUS.CO

Based on the information provided herein, this Application for Permit-to-Drill complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: David S. Nashin Director of COGCC Date: 11/18/2009

API NUMBER
05 075 09384 00

Permit Number: _____ Expiration Date: 11/17/2010

CONDITIONS OF APPROVAL, IF ANY: _____

All representations, stipulations and conditions of approval stated in the Form 2A for this location shall constitute representations, stipulations and conditions of approval for this Form 2 Permit-to-Drill and are enforceable to the same extent as all other representations, stipulations and conditions of approval stated in this Permit-to-Drill.

1. Provide 24 hr notice of spud to Colby Horton at 970-467-2517 or colby.horton@state.co.us. 2. Note change in surface casing depth. Set surface casing 525' minimum, per Rule 317d, cement to surface. Setting surface casing less than the approved depth is a permit violation unless prior written approval is obtained from the COGCC. 3. If completed, cement TD to 200' above D-Sand. Verify coverage with cement bond log. 4. If a dry hole, set 60 sks cement from 50' below D-Sand base to 100' above D-Sand top, 40 sks cement 50' above Niobrara top, 50 sks cement ½ out, ½ in surface casing, 10 sks cement at top of surface casing, cut casing 4' below GL, weld on plate, 5 sks cement in rat hole and 5 sks cement in mouse hole. Restore surface location.

Attachment Check List

Att Doc Num	Name	Doc Description
1691954	CORRESPONDENCE	LF@2155717 1691954
1759251	APD ORIGINAL	LF@2146085 1759251
1759253	WELL LOCATION PLAT	LF@2146086 1759253
1759254	LEGAL/LEASE DESCRIPTION	LF@2146087 1759254
1759262	30 DAY NOTICE LETTER	LF@2146088 1759262
1940937	SURFACE CASING CHECK	LF@2161532 1940937
16992258	30 DAY NOTICE LETTER	LF@2160161 16992258

Total Attach: 7 Files